

CLAIMS ONLY						Application Number <b>10/808511</b>	Filing Date					
						Applicant(s)						
						• May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	/	/	/	/	/	51						
2	/	/	/	/	/	52						
3	/	/	/	/	/	53						
4	/	/	/	/	/	54						
5	/	/	/	/	/	55						
6	/	/	/	/	/	56						
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41						91						
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43						93						
44						94						
45						95						
46						96						
47						97						
48						98						
49						99						
50						100						
Total Indep	3		3			Total Indep						
Total Depend	5	←	7	←	→	Total Depend	←	←	←	←		
Total Claims	8		10			Total Claims						